



**SERVICE
INCLUSION
FORM
LOCAL OFFER**

SECTION 1: THE SERVICE

- New to Local Offer Already on Local Offer

Link to page (if already on the Local Offer):

Name of service:

Type of service provided (select from area below):

- | | | |
|---------------------------------|--|---|
| <input type="radio"/> Education | <input type="radio"/> Education Health and Care Plan | <input type="radio"/> 16-25 |
| <input type="radio"/> Health | <input type="radio"/> Housing | <input type="radio"/> Transport |
| <input type="radio"/> Wellbeing | <input type="radio"/> Leisure | <input type="radio"/> Training and Drop Ins |
| <input type="radio"/> Care | <input type="radio"/> Information Advice and Support | <input type="radio"/> Have your Say |

MANDATORY - LOCAL OFFER UPDATES

For the purposes of ensuring that information on Southwark Local Offer remains up to date, the Local Offer Team will contact your service periodically to check that your information remains correct. Please provide the contact details of the nominated contact for your service.

Name:

Job Title:

Telephone no:

Email:

a. The Service:

A brief description of your service - if you provide more than one service please complete multiple forms to appear in the appropriate sections of the Local Offer

Please continue on a separate sheet if necessary

b. How this is provided?:

E.g. you can put details of any drop in sessions that your service offers.

Training provided:

Please provide details of training offered by your service.

You will need to separately email localoffer@southwark.gov.uk details of any one-off events/training/workshops to be advertised on the Local Offer.

SECTION 2: CRITERIA

Who is this service for?:

Child/Young person

Parent/Carers

Age range (if applicable):

This is the place to tell us about any specific areas of SEND you focus on, if the service is only for Southwark residents etc

How to access the service:

The referral route - if you have a form we can include a link in the Local Offer Please include if a EHC Plan is necessary for example...

SECTION 3: OTHER INFORMATION

Accessibility of this service:

This can include physical accessibility, adjustments to opening hours, any specifics around personal care/ communication, Interpretation service etc.

How is the service funded?

Part of the Council

Commissioned by the Council

Funded by a charity

Other (please provide details):

Charity no. (if applicable):

Do families need to pay for the service?:

Yes No

Please include if your service can be paid for privately or via direct payments etc....

Confidentiality and impartiality:

If this applies directly to your service i.e. if you provide information, advice and support

SECTION 4: CONTACT DETAILS FOR SERVICE

Address:

Telephone no:

Email:

Useful to know:

E.g. the office is closed on Mondays during Term Time. You can either send an email or leave a message on the answer phone and we will contact you on our return

Please email your completed form and any promotional material you want included on your page e.g. leaflets, pictures etc to: localoffer@southwark.gov.uk

Type name

Submission Date

FOR OFFICE USE ONLY

Actioned by:

Date:

Review Date: